

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE:

JOSE O. SANTOS MORALES

DEBTOR

CASE NO. 12-07162-ESL

CHAPTER 13

**NOTICE OF FILING OF AMENDED CHAPTER 13 PLAN
AND CERTIFICATE OF SERVICE**

TO THE HONORABLE COURT:

COMES NOW, **JOSE O. SANTOS MORALES** debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays:

1. Debtor is hereby submitting an amended Plan dated October 23, 2012, herewith and attached to this motion.
2. This amended Chapter 13 Plan is filed to provide for all future tax refunds to fund the Plan, and to correct the step up payment.

I CERTIFY that on this same date a copy of this notice was sent by the Clerk of the Court using CM/ECF systems which will send notifications of such to the Chapter 13 Trustee; and also certify that I have mailed by United States Postal Service copy of this motion to the following non CM/ECF participants, debtor, Jose O. Santos Morales and to all creditors and parties in the above captioned case.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 23rd day of October, 2012.

/s/ Roberto Figueroa Carrasquillo

ROBERTO FIGUEROA CARRASQUILLO
USDC #203614
ATTORNEY FOR PETITIONER
PO BOX 186
CAGUAS PR 00726
TEL. NO. (787) 744-7699
FAX (787) 746-5294
EMAIL: rfigueroa@rfclawpr.com

United States Bankruptcy Court
District of Puerto Rico

IN RE:

Case No. 3:12-bk-7162

SANTOS MORALES, JOSE OSVALDO

Chapter 13

Debtor(s)

CHAPTER 13 PAYMENT PLAN

- The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee directly by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
- The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.

PLAN DATED: _____	<input checked="" type="checkbox"/> AMENDED PLAN DATED: 10/23/2012																			
<input type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION	Filed by: <input checked="" type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other																			
I. PAYMENT PLAN SCHEDULE																				
<table> <tr><td>\$ 120.00</td><td>x 42</td><td>= \$ 5,040.00</td></tr> <tr><td>\$ 510.00</td><td>x 18</td><td>= \$ 9,180.00</td></tr> <tr><td>\$ _____</td><td>x _____</td><td>= \$ _____</td></tr> <tr><td>\$ _____</td><td>x _____</td><td>= \$ _____</td></tr> <tr><td>\$ _____</td><td>x _____</td><td>= \$ _____</td></tr> <tr><td colspan="2">TOTAL: \$</td><td>14,220.00</td></tr> </table>	\$ 120.00	x 42	= \$ 5,040.00	\$ 510.00	x 18	= \$ 9,180.00	\$ _____	x _____	= \$ _____	\$ _____	x _____	= \$ _____	\$ _____	x _____	= \$ _____	TOTAL: \$		14,220.00	II. DISBURSEMENT SCHEDULE	
\$ 120.00	x 42	= \$ 5,040.00																		
\$ 510.00	x 18	= \$ 9,180.00																		
\$ _____	x _____	= \$ _____																		
\$ _____	x _____	= \$ _____																		
\$ _____	x _____	= \$ _____																		
TOTAL: \$		14,220.00																		
Additional Payments: \$ _____ to be paid as a LUMP SUM within _____ with proceeds to come from:	<p>A. ADEQUATE PROTECTION PAYMENTS OR \$ _____</p> <p>B. SECURED CLAIMS:</p> <p><input type="checkbox"/> Debtor represents no secured claims.</p> <p><input checked="" type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> Trustee pays secured ARREARS: Cr. COOP A/C NAGUABI Cr. FIRST BANK Cr. # 169231000000 # 100738670255606 # \$ 3,358.00 \$ 1,640.00 \$ <input checked="" type="checkbox"/> Trustee pays IN FULL Secured Claims: Cr. CRIM Cr. Cr. # XXX-XX-3015 # # \$ 3,085.00 \$ \$ <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: Cr. Cr. Cr. # # # \$ \$ \$ <input type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder: <input type="checkbox"/> Other: <input checked="" type="checkbox"/> Debtor otherwise maintains regular payments directly to: COOP A/C NAGUABI FIRST BANK 																			
PROPOSED BASE: \$ 14,220.00	<p>C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2)</p> <p>D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims.</p> <ol style="list-style-type: none"> (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: Cr. Cr. Cr. # # # \$ \$ \$ Unsecured Claims otherwise receive PRO-RATA disbursements. 																			
Signed: /s/ JOSE OSVALDO SANTOS MORALES Debtor	<p>OTHER PROVISIONS: (Executory contracts; payment of interest to unsecureds, etc.) * "Tax refunds will be devoted each year, as periodic payments, to the plan's funding until plan completion. The plan shall be deemed modified by such amount, without the need of further Court order. The debtor(s) shall seek court's authorization prior any use of funds."</p> <p>Priority: \$70.00 Late filed claims filed by creditors will receive no distribution. "Surrenders collateral": Shares/savings in any Cooperativa/Association/Bank. Debtor reserves the right to object claims after plan confirmation.</p>																			
Joint Debtor																				

SANTOS MORALES, JOSE OSVALDO
REPARTO SANTIAGO
C19
NAGUABO, PR 00718

UNITED COLLECTION BUREAU
5620 SOUTHWYCK BLVD STE 206
TOLEDO, OH 43614-1501

R. Figueroa Carrasquillo
Law Office
PO Box 193677
San Juan, PR 00919-3677

CLARO
PO BOX 70366
SAN JUAN, PR 00936-8366

COOP A/C NAGUABEÑA
PO BOX 69
NAGUABO, PR 00718-0069

CRIM
PO BOX 195387
SAN JUAN, PR 00919-5387

DEPARTAMENTO DE HACIENDA
PO BOX 9024140
SAN JUAN, PR 00902-4140

FIRST BANK
PO BOX 19327
SAN JUAN, PR 00910-1427

GAS CONECTION CORP
PO BOX 12
FAJARDO, PR 00738-1227

LEONARD & ASSOCIATES PSC
PO BOX 366220
SAN JUAN, PR 00936-6220

SEARS
PO BOX 6189
SIOUX FALLS, SD 57117-6189